

## **Application for Employment:**

Applicant Name:				
Position Applied For:	Date:			
Telephone Number: ()	-			
Cell Phone Number: ()	_			
Address:				
Desired Salary or Hourly Rate:				
Have you worked at South Hampton Before? Yes	No			
Have you ever plead guilty or no contest to, or been cor was a conviction that was eradicated, erased, sealed, an resulted in a referral to a diversion program, please do application. Yes No	nulled by court, expunged, or			
Have you recently been arrested and awaiting a court d Yes No	late or trial for any type of matter?			
Have you ever initiated an act of violence in any type of	f workplace? Yes No			
Please provide the details for any question answered as automatically disqualify you as an applicant for an ava evaluated equally.	•			
Prior Work Experience.				
<u>Prior Work Experience:</u>				
Please fill the below information out to the best of your being listed first. Please also include any military servic if applicable.				
Work Experience 1:				
Employer Name: ]	Business Type:			
Address:				

Telephone Number: ()
Employment Dates: From/ To/
Position Title: Duties of Position:
Name of Supervisor or Manager:
Starting Wage: Wages at Time of Departure:
Reason for Departure:
Is it ok to use this business as a reference? Yes No
Work Experience 2:
Employer Name: Business Type:
Address:
Telephone Number: ()
Employment Dates: From/ To//
Position Title: Duties of Position:
Name of Supervisor or Manager:
Starting Wage: Wages at Time of Departure:
Reason for Departure:
Is it ok to use this business as a reference? Yes No
Work Experience 3:
Employer Name: Business Type:
Address:
Telephone Number: ()
Employment Dates: From/ To//
Position Title: Duties of Position:
Name of Supervisor or Manager:
Starting Wage: Wages at Time of Departure:
Reason for Departure:
Is it ok to use this business as a reference? Yes No

Education:	School Name and Location:	Studied:	Years Completed:
High School:		. <u> </u>	
College:			
Other Type of			

## **References:**

Please list any references that you may have in addition to those listed in the work experience form of this application. You may list anyone as a reference in this section.

## **Business Related References:**

Name:	Position:	Company:	<b>Telephone Number:</b>
1			
2			
3			
4			

## **Personal References:**

Name:	Position:	Company:	<b>Telephone Number:</b>
1			
2			
3			
4			

I certify that all information on this application or other documents submitted with this application or during any type of interview is complete and accurate to the best of my knowledge. I understand that any type of falsification, misrepresentation, or omission of information may result in disqualification from consideration of employment or, if employed, disciplinary action, up to and including immediate dismissal.

I authorize The Golf Club at South Hampton or agents representing The Golf Club at South Hampton to confirm all information contained in this application and supporting documents as it relates to the position that I am seeking and to the extent permitted by federal, state, and local law. I agree to complete any requisite forms for the background investigation. For some of the positions offered by The Golf Club at South Hampton, driving may be a requirement of the normal job duties. I understand that in order to perform these duties, I must possess a valid driver's license and valid automobile liability insurance. I understand that my employment is contingent on possessing both of these items should driving be a requirement.

If employed by The Golf Club at South Hampton, I understand and agree to the extent permitted by federal, state, and local law that The Golf Club at South Hampton may conduct investigations of on site property such as but not limited to (your office, desk, etc.) without notification. These searches may also include personal property if necessary.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality/non compete/conflict of interest form.

I understand that should The Golf Club at South Hampton have or establish at some point during my employment a drug and/or alcohol testing program consistent with federal, state, and local law, I will be subject to testing. Should I be offered a conditional status or status of employment and the testing result as positive at anytime during that period of employment or conditional status, my employment status at The Golf Club at South Hampton could be withdrawn or terminated. I agree to work under the conditions requiring a drug free workplace consistent with applicable federal, state, and local law. I also agree that all employees may be subject to urinalysis, blood screening, and/or other medically recognized tests designed to detect the presence of alcohol or controlled drugs. If employed I understand that the taking of alcohol and/or drug tests is a condition of employment and I agree to undergo alcohol and drug testing consistent with The Golf Club at South Hampton's policies and applicable federal, state, and local law.

I understand that should I be hired by The Golf Club at South Hampton, I will be required to provide legitimate documentation regarding my identity and eligibility to be legally employed in the United States of America by The Golf Club at South Hampton. I also understand that The Golf Club at South Hampton employs only those that are eligible to work in the United States.

I authorize and consent to, without reservation, any party or agency contacted by The Golf Club at South Hampton to furnish the above mentioned information. I hereby release, discharge and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to The Golf Club at South Hampton or its representatives pursuant to authorization from any liability, claims, charges, or causes of action which I may have as a result of delivery or disclosure of the above requested information. I hereby release The Golf Club at South Hampton and its representatives for seeking such information and all other persons, corporations, or organizations furnishing such information. I certify that I have provided accurate, complete, and true information on this application, understand the verbiage listed on the application, and agree to its content.

Applicant Name:	
Applicant Signature:	Date:

If the applicant is a minor, the foregoing release and consent must be signed by the applicant's parent or legal guardian. Signature by the applicant's parent or legal guardian constitutes acknowledgment by the applicant and the parent or legal guardian that The Golf Club at South Hampton, to the extent permitted by federal, state, and local law, can test the applicant for controlled substances, conduct inspections of property without notice, and communicate screen results to The Golf Club at North Hampton personnel who need to know, the applicant, and the applicant's legal guardian.

Parent/Legal Guardian:	Date:
Witness:	Date: